

UTILITY PATENT APPLICATION TRANSMITTAL <small>Form for new nonprovisional applications under 37 CFR 1.53(b)</small>		Attorney Docket No. 2002-0524CON	Total Pages 36
First Named Inventor or Application Identifier Eslambolchi, H. et al.			
Express Mail Label No. ER 240486277 US		17510 U.S. PTO 10/8-5385	

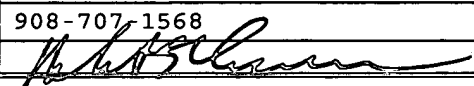
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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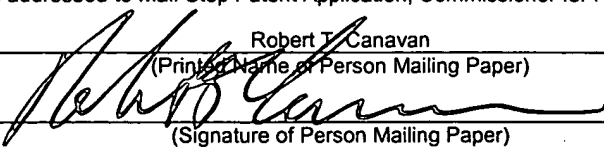
1. <input checked="" type="checkbox"/> Free Transmittal Form <small>(submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 14] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings(if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 3] 4. Oath or Declaration [Total Pages 3] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application(37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <small>[Note Box 17 below]</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 163(d)(2) and 1.33(b) 5. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
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17. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior Application No: 10/379,020 Prior application information: Examiner: Nguyen, Jimmy Group/Art Unit: 2829 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.	ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none"> 8. <input type="checkbox"/> Assignment Papers(cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b)Statement <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement(IDS)/PTO-1449 Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment (11 pages) 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 15. <input type="checkbox"/> Request and Certification under 35 U.S.C.122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 16. <input checked="" type="checkbox"/> Other : Power of Attorney
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18. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		Customer Number - 26652	<input type="checkbox"/> Correspondence address below

NAME	Samuel H. Dworetzky		
ADDRESS	AT&T CORP. P.O. Box 4110		
CITY	Middletown	STATE	New Jersey
COUNTRY	United States of America	ZIP CODE	07748-4110
		FAX	732-368-6932

19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Robert T. Canavan	Reg. #	37592
TELEPHONE	908-707-1568		
SIGNATURE			DATE
			04/01/2004

"Express Mail" Mailing Label Number ER 240486277 US	Date of Deposit 04/01/2004
I hereby certify that this application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Robert T. Canavan <small>(Printed Name of Person Mailing Paper)</small>  <small>(Signature of Person Mailing Paper)</small>	

FEE TRANSMITTAL

Patent Fees are subject to annual revision.

**TOTAL AMOUNT
OF PAYMENT****982****Complete If Known**

Application Number	not yet assigned
Filing Date	herewith
First Named Inventor	Eslambolchi, H.
Examiner Name	Nguyen, Jimmy (anticipated)
Group/Art Unit	2829 (anticipated)
Attorney Docket No.	2002-0524CON

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **01-2745**
 Deposit Account Name **AT&T CORP.**

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance

FEE CALCULATION**1. FILING FEE**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
1001	770	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee	770
1002	340	Design Filing Fee	
1004	770	Reissue Filing Fee	
1005	160	Provisional Filing Fee	

SUBTOTAL (1) 770**2. CLAIMS**

☒ Filing Under 37CFR 1.53 (b)
☐ CPA Under 37CFR 1.53 (d)
☒ Amendment

		Extra Claims	Fee from below	Fee Paid
Total	27 - 20 =	7	18	126
Ind.	4 - 3 =	1	86	86

Multiple Dependent Claims

Large Fee Code	Entity Fee(\$)	Fee Description
1202	18	Claims in excess of 20
1201	86	Independent Claims in excess of 3
1203	280	Multiple Dependent Claims
1204	86	** Reissue independent claims over original patent
1205	18	** Reissue claims in excess of 20 and over original patent

** or number previously paid, if greater; for Reissues, see above

SUBTOTAL (2) 212**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
1051	130	Surcharge - late filing fee or oath	
1052	50	Surcharge - late provisional filing fee or cover sheet	
1053	130	Non-English specification	
1812	2520	For filing a request for reexamination	
1804*	920	Requesting publication of SIR prior to Examiner action	
1805*	1840	Requesting publication of SIR after Examiner action	
1251	110	Extension for response within first month	
1252	420	Extension for response within second month	
1253	950	Extension for response within third month	
1254	1480	Extension for response within fourth month	
1255	2010	Extension for response within fifth month	
1401	330	Notice of Appeal	
1402	330	Filing a brief in support of an appeal	
1403	290	Request for oral hearing	
1504	300	Publication fee for early, voluntary, or normal publication	
1452	110	Petition to revive - unavoidable	
1453	1330	Petition to revive - unintentional	
1501	1330	Utility Issue fee (or reissue)	
1502	480	Design Issue fee	
1460	130	Petitions to the Commissioner	
1807	50	Processing fee for provisional applications	
1808	180	Submission of Information Disclosure Statement	
8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	Request for Continued Examination (RCE)	
1802	900	Request for expedited exam of a design application	

Other fee (specify):

SUBTOTAL (3) 770**SUBMITTED BY**Typed or Printed Name **John E. Etchells****Complete (if applicable)**

Reg. Number

Signature

Date

4/1/04

Deposit Account User ID